MINUTES OF THE HEALTH SYSTEM REFORM TASK FORCE

Wednesday, October 21, 2009 – 2:00 p.m. – Room 250 State Capitol

Members Present:

Sen. Sheldon L. Killpack, Senate Chair

Sen. Gene Davis

Sen. Peter C. Knudson

Rep. Jackie Biskupski

Sen. Wayne L. Niederhauser

Rep. Bradley M. Daw

Rep. Bradley G. Last

Rep. David Litvack

Rep. Merlynn T. Newbold

Members Absent:

Speaker David Clark, House Chair Rep. Ronda Rudd Menlove

Staff Present:

Mr. Mark D. Andrews, Policy Analyst

Ms. Catherine J. Dupont, Associate General Counsel

Ms. Chelsea Barrett, Legislative Secretary

Mr. Benjamin Beutler, Research Assistant

Note: A list of others present, a copy of related materials, and an audio recording of the meeting can be found at www.le.utah.gov.

1. Task Force Business

Sen. Niederhauser called the meeting to order at 2:17 p.m.

Speaker Clark and Rep. Menlove were excused from the meeting.

2. Payment and Delivery Reform

Ms. Christie North, Vice President, Utah Programs, HealthInsight, and Mr. Marc Bennett, Chief Executive Officer, HealthInsight, updated the Task Force on the status and many of the details of HealthInsight's payment and delivery reform demonstration projects. HealthInsight hopes to have access to data from the all-payers database in January and to obtain commitments from providers at that time to participate in an acute care pilot project and a chronic care pilot project. Providers will sign up to participate in the projects for 9 or 12 months. Ms. North expects preliminary results of the demonstration projects to be available sometime during the 2010 interim. The projects may be expanded to other providers, payers, and disease processes, but it is difficult to say when that will occur.

Dr. Keely Cofrin Allen, Director, Office of Healthcare Statistics, Department of Health, said that she anticipates the all-payers database will be up and running within six weeks.

3. Health Information Technology

Ms. Amy Rees Anderson, Chief Executive Officer, MediConnect Global, briefed the Task Force on the services provided by her company. She explained that MediConnect Global is a medical record retrieval and delivery company headquartered in South Jordan that gathers, digitizes, and extracts information from patient medical records on behalf of health plans, parties to legal actions, pharmaceutical companies, and life insurers. The company has digitized the health records of six million individuals and will soon be offering patients free access to their records. She explained health care providers' lack of economic incentive to use electronic medical records and said that the only way to change their behavior is to give them an incentive.

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4. Utah Health Exchange

Ms. Tanji Northrup, Utah Insurance Department, updated the Task Force on the Utah Defined Contribution Risk Adjuster Board's progress. She said a subcommittee has been created to address related legal issues.

Mr. John T. Nielsen, Executive Director, Office of Consumer Health Services, updated the Task Force on the implementation of the Utah Health Exchange. He said that the Office has beta tested the defined contribution portion of the Exchange and learned several things: the Office needs to do more outreach to employers, the Office needs to do a better job educating insurance producers, and the enrollment time for employees has been too short. He also noted that there are several concerns related to the standardized application process. These include concerns about driver license questions, questions that are repetitive, and the requirement that employees of an employer registered with the Exchange must fill out an application even if they are not going to apply for coverage through the Exchange.

Mr. Nielsen said the employee enrollment time has been extended once and one of the contractors working on the development of the Exchange would like to have it extended again.

Mr. Nielsen reported on several meetings of Utah officials with a senior adviser to President Obama. The main message from the state was that states' ability to be creative and move health reform forward should not be preempted. He spoke of meeting with Congressmen Chaffetz and Bishop as well.

Mr. Nielsen indicated Utah has been contacted by a number of states about the Exchange. They are amazed at the amount of progress that has been made in a short time.

5. Workgroup Reports

Rep. Last and Sen. Knudson updated the Task Force on the work of the Transparency, Quality and Infrastructure Workgroup. Rep. Last said the he is convinced the Public Employees Health Program (PEHP) is working hard to find innovative ways to save money. He indicated he would encourage PEHP and legislative leadership to look at potential innovations, including medical tourism, and prepare a report. He does not believe legislation is needed at this time to direct PEHP to do specific things. He said that there is a large opportunity to do something on tort reform and that there is a number of things the state could do. Sen. Knudson updated the Task Force on the development of all-payers database reports.

Rep. Litvack requested that the tort reform ideas reviewed by the Workgroup be shared with other members of the Task Force and encouraged the participation of all interested parties in discussions about medical liability.

6. 2010 Draft Legislation

Rep. Dunnigan distributed and explained 2010 General Session draft legislation, "Amendments to Health Insurance Coverage in the State Contracts." He explained that the draft legislation was developed as follow-up to 2009 H.B. 331, "Health Reform - Health Insurance Coverage in State Contracts." He indicated the bill will be brought back next month for the vote of the Task Force.

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Rep. Newbold distributed and explained 2010 General Session draft legislation, "Health Reform - Administrative Simplification."

MOTION: Rep. Newbold moved to approve 2010 General Session draft legislation, "Health Reform - Administrative Simplification" as a committee bill. The motion passed unanimously with Chair Killpack and Rep. Last absent for the vote.

Rep. Newbold distributed and explained "Health Reform - Uniform Electronic Standards - Insurance Information," 2010 General Session draft legislation.

The Task Force discussed the draft legislation.

7. Midvale Wellness Demonstration Project

Mr. John Kessler, Co-Chair, Healthy Communities Wellness Self Management Network, and Dr. Stephen Prather, MD, distributed "Healthly People Healthy Midvale City, Executive Summary" and "The Healthy Community and Wellness Self Management," and briefed the Task Force on Midvale's community wellness demonstration project. The project is seeking partners and funding.

8. Insurance Coverage for Prosthetic Devices

Representative David Litvack referred to 2009 General Session H.B. 89, "Prosthetic Limb Health Insurance Parity" and indicated that a majority of insurers have plan provisions that act as barriers to individuals that need prosthetics. Specifically, he noted that in contrast to Medicare's prosthetic replacement rule based on medical necessity, Utah's Public Employee's Health Program prosthetic replacement rule is based on time between replacements.

Ms. Tami Stanley, amputee advocate, spoke about her experience with prosthetics and argued for "parity" or consistency of coverage across prosthetic types, noting how insurance plan benefits often differ based on whether a device is an internal prosthetic (knee, hip, toe, etc.) or an external prosthetic (leg, arm, etc.). She indicated that the Medicare standard for prosthetics is fair and consistent and recommended aligning Utah insurance provisions with that standard.

9. Other Business

The Task Force had no additional business.

10. Adjourn

MOTION: Sen. Davis moved to adjourn the meeting. The motion passed unanimously with Sen. Killpack, Sen. Knudson, and Rep. Last absent for the vote.

Sen. Niederhauser adjourned the meeting at 5:00 p.m.